

A STUDY OF LIBRARY SERVICE IN A SELECTED GROUP
OF GENERAL HOSPITALS IN THE UNITED STATES

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CHAPTER I

INTRODUCTION

Hospitals can be divided broadly into two classes in accordance with the type of service they render: general hospitals which accept patients suffering from a variety of acute medical, surgical, obstetric, pediatric, and sometimes psychiatric conditions, and special hospitals for the treatment of specific types of diseases. Children's hospitals are considered special hospitals because, although their services are frequently of a general nature, they serve only one age group of the population.

General hospitals furnish about forty per cent of the total hospital capacity of the United States and are used by ninety per cent of the hospital clientele. The general hospital is the nerve center of the entire hospital organization of the country, the generator of medical advancement and the pace-setter for the high standards of medical care.¹

The library is now regarded as one of the essential institutions of a well organized community. Inasmuch as hospitals, and especially the large general hospitals, are communities they should have a well-organized library. A hospital population needs a library for the same reasons that other communities need one. It is an axiom that every hospital having the best interest of its patients at heart, and that is modern in its therapeutic attributes, will include as an essential part of its equipment a carefully selected hospital library for patients in charge of a librarian of training

¹E. H. L. Corwin, The American Hospital (New York: The Commonwealth Fund, 1946), p. 194.

and experience.¹

According to standards established by the American Library Association, the object of patients' libraries is to furnish recreational and educational reading materials for all patients, with the purpose of contributing to their recovery and welfare. In fulfilling this objective the following basic requirements are necessary: an adequate staff, an active collection of books, magazines and pamphlets, ample library space, and the necessary equipment to bring these materials to nonambulatory patients. In further attainment of its objective, the patients' library coordinates its activities with all other departments of the hospital to further the welfare of the patients and to aid them in making social and educational adjustments.²

Purpose and Significance

The purpose of this study is to present a picture of the administrative organization, facilities, and services of the patients' libraries in the forty largest general hospitals in the United States, with the exception of those general hospitals operated by the Federal Government under the supervision of the Veterans' Administration.

The benefits derived from reading are far too intangible to chart. But physicians, in increasing numbers, advocate the idea that a patient must be treated as a whole, and that not only his physical, but his emotional and mental condition must be taken into account. Every physical illness has its mental component which physicians now recognize as important to recovery as the knitting of a broken bone, and selected directed reading is becoming the

¹Elizabeth Pomeroy, A B C's for Hospital Librarians (Chicago: American Library Association, 1943), p. 5.

²"Objectives and Standards for Hospital Libraries and Librarians," Illinois Libraries, XXVII (March, 1945), pp. 172-175.

medicine used to counteract unfavorable mental attitudes.

By its very existence a general hospital exercises a powerful influence on the pattern of medical and health care in a community. The degree of its effectiveness varies in proportion to the breadth of vision of its policy makers and administrators, the quality of its medical staff, the cooperative relation which it establishes with other agencies, both public and private and the adequacy of its equipment and its physical plant.

In the modern hospital the psychology of the patient has become a matter of paramount importance. This presents a field of therapy in which a patients' library service can prove beneficial. This study should be significant in pointing out whether or not the administrators and policy makers of the forty largest general hospitals in the United States have recognized this fact and have incorporated the patients' library as one of the therapeutic agencies of the hospital.

Methodology

The forty largest hospitals, according to bed capacity, were taken from a list of general hospitals in the United States compiled by the American Medical Association. This was a list of "registered hospitals" which means they conform to the essentials adopted by the American Medical Association as minimum standards for hospital service in the best interests of the patient.

Questionnaires were sent to the administrators of these hospitals and also to persons in charge of library service. Of the forty questionnaires sent out, twenty-three or fifty-eight per cent were returned. Two of these were not completed because lack of personnel made it impossible to furnish the material requested. Three were returned incomplete with letters stating that the hospital contained only a medical library for members of

the staff.

Replies were received from the following hospitals:

| | |
|-----------------------------------|----------------------------|
| Anker Hospital | St. Paul, Minnesota |
| Bellevue Hospital | New York City |
| Charity Hospital | New Orleans, Louisiana |
| Cincinnati General Hospital | Cincinnati, Ohio |
| City Hospital | Cleveland, Ohio |
| Confederate Memorial Hospital | Shreveport, Louisiana |
| Cook County Hospital | Chicago, Illinois |
| Denver General Hospital | Denver, Colorado |
| Edward J. Meyer Memorial Hospital | Buffalo, New York |
| Gallinger Municipal Hospital | Washington, D. C. |
| Grady Hospital | Atlanta, Georgia |
| Hahnemann Hospital | Philadelphia, Pennsylvania |
| Hartford Hospital | Hartford, Connecticut |
| Indianapolis City Hospital | Indianapolis, Indiana |
| Johns Hopkins Hospital | Baltimore, Maryland |
| Los Angeles County Hospital | Los Angeles, California |
| Metropolitan Hospital | New York City |
| Milwaukee County Hospital | Milwaukee, Wisconsin |
| Philadelphia General Hospital | Philadelphia, Pennsylvania |
| Presbyterian Hospital | New York City |
| St. Louis City Hospital | St. Louis, Missouri |
| San Francisco Hospital | San Francisco, California |
| Youngstown Hospital | Youngstown, Ohio |

Due to the fact that the information given by the hospitals in the questionnaires is to be held in confidence, the names of the hospitals will not be given in the following chapters, but they will be designated only by letters of the alphabet. Because of the scarcity of information given by individual hospitals all of the hospitals are not listed in each table; only those which answered the specific question illustrated by the tables are listed. A complete list of the hospitals to whom questionnaires were sent will be found in the Appendix.

Literature on library service in general hospitals was studied carefully as background material and was used in evaluating the findings. Hospital library standards of the American Library Association were used to further evaluate the findings.

Chapter II will give a picture of the administration of the patients'

library service in regard to the type of library service available to patients, finance, and personnel. Chapter III will discuss the materials collections of the selected hospitals. Chapter IV will discuss the library use and services including types of patrons, regulations of use, and special services to patients and hospital staff. Chapter V will give the summary and conclusions based on the findings.

History of Library Service to Hospital Patients

The Egyptian, Greek, and Roman temples were the forerunners of the hospital today insofar as they provided refuge for the sick and the gymnasia attached to them utilized gymnasiotherapy. These temples housed the libraries of the period and included rooms for visitors, attendants, priests, and physicians. One of these hospitals which attracted great numbers of patients was the temple of Kos, where the illustrious Hippocrates was born in 460 B.C. and later became priest-physician. The influence of his writings prevailed for many years.

Most of the hospitals erected during the Middle Ages were associated with monasteries or were founded by religious groups. Because most of the patients who received care in these institutions were from the illiterate group, when the great Al-Mansur Hospital was erected in Cairo in 1276 it provided many modern conveniences including music and story-telling for the sleepless. These methods of treatment may be considered the forerunners of the bibliotherapy supplied by the patients' library of today.¹

The first hospital medical library to be established in the United States was the library at the Pennsylvania Hospital in Philadelphia in 1762. It was followed by the library in the New York City Hospital in 1796.

¹Malcolm T. MacEachern, Hospital Organization and Management (2d ed.: Chicago: Physicians Record Co., 1949), pp. 233-235.

Many of the problems of organization and administration similar to those which arise in the hospital today were met in the Pennsylvania Hospital. The original plan of this hospital provided for a library in the central building. In May 1763, the medical staff agreed that the gratuities received from the students who attended the wards should be appropriated for the purpose of founding a medical library. The American Medical Association as early as 1919 gave expression to the desirability of establishing such medical libraries.

Although the patients' library as administered today is considered a recent development in the library field and its value is as yet not everywhere fully recognized, traces of the beginnings of such libraries can be found in historical sketches of the older institutions. The history of the Massachusetts General Hospital contains an account of the Warren Library. In 1811 the rules of the hospital provided that the patients on the wards be supplied with Bibles and other religious books. Not long after the actual opening of the Hospital, in September, 1821, a committee was appointed to collect a library for the use of the hospital and asylum for the insane and to make suitable arrangements for keeping the collection.

Before World War I, few hospitals had organized libraries for patients. Those which did have them were largely private mental hospitals. There had been enough utilization of books in hospitals, however, to disclose certain facts: that many patients desire to read; that certain books and kinds of books were to be recommended in preference to others; and that reading can have therapeutic value.

In 1918 the American Library Association War Service was permitted to place women librarians in the Army, Navy, and other government hospitals. This marked the beginning of organized library service on a large scale.

These libraries proved invaluable and eventually led to a greater expansion of hospital library work by the Federal Government, by the state, and by cities.

During the year 1933 the International Hospital Congress, meeting in London, put forward its conclusions in respect to the development of hospital libraries for patients. Based on reports and investigations of hospital library conditions and facilities received from many countries, the principal value of reading for patients was recognized for its recreational, educational, and therapeutic value. At this Congress it was agreed that a library for patients is an essential part of the equipment of every type of hospital, and that every type of hospital should provide the necessary rooms for a central library; that books should be regularly distributed to the wards of the hospitals, and that the books be obtained according to the methods best suited to local conditions and the type of hospital concerned.¹

The loan of books from public libraries to hospitals by a central hospital library organization or by an individual organization within each hospital was proposed at this meeting. Greater attention was suggested for the extension of libraries to sanatoria and mental hospitals. One important further recommendation, from the standpoint of the patient for whom these facilities were recommended, was the inclusion of a properly trained hospital librarian as a specialist and professional worker in the hospitals.

World War II brought a renewed interest in patients' libraries and the therapeutic effect of reading, based upon the recognition that the best medical approach can be made on patients whose minds have been conditioned against the tragedies, fears, and unrest of the present-day world.

¹Ray Amberg, "Patients' Libraries, Library Journal, LXVIII (March, 1942), pp. 195-197.

As it can be seen patients' libraries have been in a somewhat doubtful position as the library profession has been reticent in developing the field and the hospital world has been tardy in allowing the necessary funds for adequate development. It has not been until comparatively recent years that the two have joined forces.¹

¹Mildred Schumacher, "Patients' Libraries," Special Libraries, XXXII (September, 1941), pp. 235-237.

CHAPTER II

ADMINISTRATION OF PATIENTS' LIBRARIES IN THE SELECTED HOSPITALS

In the administration of patients' libraries the viewpoint of both the hospital and the library are taken into consideration. The library adapts its service to hospital routine and the hospital cooperates in making certain adjustments. The hospital library is not like a public library which is an institution in itself, established primarily for the education and culture of the community, but it is one part of the great machine of the hospital. But the library is not merely a collection of books placed on shelves in a room. It is a collection of books sufficiently well-rounded to meet the reasonable demands of the hospital whose patients it serves, supported by funds which permit regular and adequate accessions. It employs methods which stimulate, guide, and serve the readers' interests. It is staffed with personnel not only versed in techniques, but also capable of carrying on the more difficult work of getting the right book to the right reader.

Administrative Organization of Patients' Libraries

A hospital library service is classed as one of the morale agencies of a hospital. . . . To any hospital administrator this means something very material and very necessary to the successful administration of his hospital. It is the unanimous testimony of all that a hospital library service is one of the most important agencies in a modern hospital for the cultivation and the stimulation of the morale, not only of the patients but also of the hospital staff. Any agency which produces such effects should always receive the sympathetic consideration of any practical hospital administrator and will inevitably contribute more than any other thing to the ultimate success of the hospital.¹

¹E. Kathleen Jones, Hospital Libraries (Chicago: American Library

I would like to advance the dictum that no well-conducted hospital can afford to be without a hospital library. Not only is it of therapeutic value to the patient, but it enhances the reputation of the hospital. The hospital which grows in reputation, in value to the community is the one which furnishes the personal touch, the thoughtful considerate care for the patient -- not only dresses wounds and cares for his disease, but comforts his mind and gives him amusement and pleasure while he is in the hospital; and nothing will do that like a good book carefully selected by a person who knows how to do it.¹

These statements came from two prominent hospital administrators, both of whom entered the medical profession before the days of organized hospital libraries. Both were largely instrumental in promoting the establishment of patients' libraries and were emphatic in their endorsement of the therapeutic value of the library.

Although many physicians and hospital administrators agree with Dr. C. H. Lavinder and Dr. F. A. Washburn, the development of patients' libraries has been slow. Table 1 illustrates this fact by showing the number of years between the founding of the hospital and the founding of the patients' library.

According to this table the two oldest hospitals were established in the 18th century, one in 1720 and the other sixteen years later in 1736. The newest hospital of the group was established in the twentieth century in the year 1917. All of the patients' libraries were established in the twentieth century, the oldest being established in 1928 and the newest one in 1945. It is interesting to note that the two oldest hospitals contain the two newest libraries with a lapse of 230 years and 209 years between the founding of the hospitals and the founding of the patients' libraries.

Association, 1939), p. 2, citing Dr. C. H. Lavinder in an address to hospital librarians.

¹E. Kathleen Jones, Hospital Libraries (Chicago: American Library Association, 1939), p. 1, citing Dr. F. A. Washburn, then director of the Massachusetts General Hospital, Boston.

TABLE 1

DATES OF FOUNDING OF HOSPITALS AND OF PATIENTS' LIBRARIES
AND SYSTEM OF LIBRARY SERVICE USED

| Hospital | Year Founded | Year Library Founded | Years Between Dates | System of Library Service |
|----------|-----------------|----------------------------|---------------------------|---------------------------------|
| A | 1878 | 1936 | 58 | Unit |
| B | 1847 | 1933 | 86 | Public library |
| C | 1720 | 1940 | 220 | Unit |
| D | 1843 | * | .. | Volunteer |
| E | 1889 | 1938 | 49 | Unit |
| F | 1917 | 1928 | 11 | Public library |
| G | 1873 | * | .. | Unit |
| H | 1821 | * | .. | Public library |
| I | 1857 | * | .. | Public library |
| J | 1736 | 1945 | 209 | Unit |
| K | 1837 | 1923 | 86 | Public library |

*Date not given.

The newest hospital was established in 1917 and its patients' library was established in 1928 with a lapse of only 11 years between the two. This may be attributed to the fact that by 1922 the way had been prepared for the development of hospital libraries along several lines. The early 1900's saw the establishment of the first organized unit libraries, the working out of theories, and the formulation of the principles involved. World War I gave great impetus to the movement. The public libraries then took a hand, extending the library idea into the hospital and medical fields. In hospitals where the budgets would not allow for the hiring of trained librarians or where the supply of trained personnel did not meet the demands, volunteers were used to provide library service to patients. Thus we have the beginning of three forms of library service to patients: (1) unit library system, (2) public library system, and (3) the volunteer method.

Unit library system.--Of the 18 questionnaires completed and

returned, 11 indicated library service for patients. Five of these 11 hospitals use the unit library system. Under this system the patients' library is a department of the hospital and is organized within the hospital. In its organization it resembles a very small public library and a trained librarian, a member of the hospital staff, is in charge. Each hospital maintains a book budget and builds its own book collection. According to Table 1 hospitals A, C, E, G, and J use this system. From the information contained in this table it would seem that all of the newer patients' libraries use this system, as the founding dates of the libraries range from 1936 to 1945.

Public library system.--Five of the 11 hospitals providing library service to patients use the public library system. Under this system the public library assumes the responsibility of library service to the hospitals by supplying books and personnel. Each hospital is staffed according to its needs. A large hospital may have one or more librarians assigned to it; a small hospital will be given service a certain number of days per week with one librarian assigned to two or more small hospitals. As to the book collections in this type of service the large hospital will have a number of volumes as a permanent collection and these will be supplemented by borrowing from the hospital collection at the public library. The technical routine is generally cut down to a minimum as all cataloging, ordering, and binding are done at the central library eliminating the processes for each hospital. According to Table 1 hospitals B, F, H, I, and K use this plan. Although two hospitals did not list the date of the founding of the library, from the information available it would seem that either the hospitals have been slow to accept the services of the public library or the public library has been reluctant to assume the responsibility of providing service for

hospitals. Yet this plan holds advantages for both the hospital and the public library. Under this system the hospital is able to secure the services of trained personnel without added expense to their budget and the public library has an opportunity to make new friends for the library by providing service for those unfortunately handicapped by illness.

Volunteer system.--Only two of the selected hospitals specified, one by letter and one by questionnaire, that library service was administered by volunteers. Under this system the book collection may vary from good to bad, usually with little or no consideration as to what should be read by patients. In hospital D, as shown in Table 1, the library is operated as one of the functions of the Occupational Therapy Department. It is supervised by the hospital's chief occupational therapist with the aid of volunteer workers from the community.

Generally when library service is provided by volunteers alone there is little or no organization. However, the method used by hospital D is good as library work has a natural alliance with occupational therapy. Both are means of building up and maintaining the personality of patients and of supplanting destructive tendencies by constructive aims. Both serve to entertain the patients and to teach them enough at the same time to help maintain their interest. One means is better adapted for one patient and the other for another patient and both can often be advantageously concentrated upon the same individual.

In the other hospital using the volunteer method (this hospital is not listed in Table 1 as the questionnaire was not completed and the information concerning the dates of the founding of the hospital and of the library is not available), the library is administered entirely by volunteers.

There has been much discussion as to whether or not volunteers should

be used in the patients' library as head librarians. One of the prevailing ideas regarding volunteers, in relation to the library profession, is that they will give hospital librarians a non-professional status. It is felt that good hospital library service can be given only by using trained and especially selected personnel for any work which demands personal contact with patient patrons. Hospital administrators require trained personnel for specialists' positions and inefficient and untrained personnel have been known to annoy hospital personnel, fatigue patients, and put the library in bad repute with hospital authorities generally.¹

However, government-supported hospitals, city, county, or state and private hospitals are alike dependent upon the goodwill of the community. The amount of financial support is in ratio to the interest and demands of those who have the welfare of the hospital and its service to the community at heart. Hospital volunteers are usually public-spirited, well-educated persons who carry their enthusiasm and knowledge outside the hospital to the people who ultimately make the final decision as to whether the hospital will be more generously supported or less. As the volunteer does the work and learns more about the methods and the needs, she realizes increasingly the necessity for more training than she possesses and the value of the professional librarian.²

Finance

As the hospital domain has expanded, hospital service has become one of the major welfare organizations of the United States. From the start

¹Anne Farrington, "Hospital Library Volunteers? No!," American Library Association Bulletin, XXXVII (September, 1943), pp. 59-61.

²Mildred Schumacher, "Hospital Library Volunteers? Yes!," American Library Association Bulletin, XXXVII (September, 1943), pp. 258-260.

most of the necessary capital investment has been provided on a nonprofit-making basis through the voluntary contributions of public-spirited citizens and religious and fraternal organizations, and through tax funds.

The ultimate responsibility for hospital management rests with the governing authorities. In hospitals maintained by tax funds this authority is vested either in a single administrative official, whose title is administrator or superintendent, or in a board under which the administrative officer is placed. For tax-supported hospitals, city, state, or county, the policies of financial administration and procedure are usually laid down by the appropriating authorities. Therefore libraries will not be established in all hospitals until the administrators and governing boards are made to realize the true importance and value of the patients' library.

Sources of income.--For hospitals as a whole, tax funds constitute the largest single source of income. As shown by Table 2, seven of the hospitals surveyed receive their support from the city; five, from the county; two, from the state; two, from nonprofit organizations, and two receive support from both city and county governments.

The auspices under which hospitals are operated are a matter of considerable importance, not only because of the administrative policy but also because of the economic and political implications. According to Table 2 only two of the seven city-supported hospitals fail to provide library service for their patients. This may be due to the fact that the city governments are more able financially to give library service to hospitals. Since three of the city-supported hospitals list their library budgets as being allocated from the public library funds there may also be close cooperation between the city-supported hospitals and the public library. Two of the five county-supported hospitals do not provide library service for their

patients, while two others provide library service supported by public library funds. One of the county-supported hospitals lists its library budget as allocated from the total hospital budget. The one state-supported hospital in the survey provides library service for its patients and the library budget is taken from the total hospital budget. Only one of the two hospitals supported by nonprofit organizations provides library service for patients. Its library budget is allocated from the total hospital budget.

From these facts it would seem then that the majority of the hospitals surveyed, whether supported by the city, county, state, or nonprofit organizations, are endeavoring to provide some type of library service for their patients.

Expenditures.--According to the standards adopted by the American Hospital Association, the American College of Surgeons, the American Library Association, the Medical Library Association, and the Special Libraries Association, after the library is established an adequate library budget administered by the librarian should be provided annually in the hospital budget for books and related materials, supplies, and equipment. Table 2 shows the total hospital budgets of the 18 hospitals that answered the question and the library budgets of those hospitals providing library service for patients.

The highest amount appropriated for any year in the total hospital budget is \$18,079,848 listed by hospital A for the year 1952. The lowest amount listed in the total hospital budget is \$2,003,431 listed by hospital R for the year 1950. The median of the total hospital budgets is \$4,562,000.

Table 2 further illustrates the fact that the cost of hospital care and treatment is steadily rising by showing that each hospital has increased

TABLE 2

SOURCES OF SUPPORT OF HOSPITALS, TOTAL
HOSPITAL BUDGETS AND LIBRARY BUDGETS

| Hospital | Source of Support | Year | Total Hospital Budget | Library Budget | Percentage of Total Budget Spent on Library |
|----------|-------------------|------|-----------------------|-------------------|---|
| A | County | 1950 | \$14,664,943.00 | \$33,809.95 | .231 |
| | | 1951 | 16,391,621.00 | 31,809.95 | .194 |
| | | 1952 | 18,079,848.00 | 30,582.25 | .185 |
| B | County | 1950 | 9,474,136.47 | ^a | -- |
| | | 1951 | 10,104,036.47 | ^a | -- |
| | | 1952 | 12,866,809.87 | ^a | -- |
| C | City | | ^b | ^b | -- |
| D | City | 1950 | 3,250,000.00 | 2,500.00 | .076 |
| | | 1951 | 3,700,000.00 | 2,500.00 | .067 |
| | | 1952 | 4,000,000.00 | 2,500.00 | .061 |
| E | NPO ^c | 1950 | 6,500,000.00 | 500.00 | .007 |
| | | 1951 | 7,000,000.00 | 500.00 | .007 |
| F | County | 1950 | 3,731,510.50 | ^a | -- |
| | | 1951 | 4,172,504.14 | ^a | -- |
| | | 1952 | 4,674,196.17 | ^a | -- |
| G | City-County | 1950 | 2,633,129.15 | ^b | -- |
| | | 1951 | 3,005,335.98 | ^b | -- |
| | | 1952 | 3,255,053.69 | ^b | -- |
| H | City | | ^b | ^a | -- |
| I | City | | ^b | ^a | -- |
| J | State | 1950 | 7,712,000.00 | 8,000.00 | .116 |
| | | 1951 | 8,226,000.00 | 9,000.00 | .102 |
| | | 1952 | 8,410,000.00 | 10,000.00 | .102 |
| K | City | 1950 | 3,961,572.43 | ^a | -- |
| | | 1951 | 4,252,330.76 | ^a | -- |
| | | 1952 | 4,687,574.07 | ^a | -- |
| L | City | | ^b | ^d | -- |
| M | City | 1950 | 4,040,000.00 | ^d | -- |
| | | 1951 | 4,825,000.00 | -- | -- |
| | | 1952 | 4,975,000.00 | -- | -- |
| N | County | -- | ^b | ^d | -- |
| O | NPO ^c | -- | ^b | ^d | -- |
| P | State | -- | ^b | ^d | -- |
| Q | County | -- | ^b | ^d | -- |
| R | City-County | 1950 | 2,003,431.00 | ^d | -- |
| | | 1951 | 2,278,213.00 | ^d | -- |
| | | 1952 | 2,368,808.00 | ^d | -- |

^aPublic library funds.^bData not available.^cNonprofit organization.^dDoes not provide library service for patients.

its total budget for the three-year period 1950-1952. This increase may be attributed to many causes; the general upward trend of prices of all commodities and of salaries and wages, the improvement of service, the larger ratio of nurses and other employees to patients and the increase of professional functions and equipment.

Of the seven hospitals without patients' libraries, only two listed their total hospital budgets, hospitals M and R. These show a slight increase in the budgets for each year, but the increase is not as great as that in the hospitals providing library service.

In spite of this increase in the total budget, only one library budget, hospital J, in Table 2, shows an increase for each year. Hospital A, in Table 2, shows a decrease for each year while hospitals D and E show the same amount for each year. Five of the hospitals, B, F, H, I, and K show their library budgets as being allocated from the public library funds and therefore the information about the budgets is unavailable.

The highest amount appropriated in the library budget for any year is \$33,809.95 listed by hospital A for the year 1950. The lowest amount in the library budget is \$500.00 listed by hospital E for the two years, 1950 and 1951. The median of the library budgets is \$3,300.00.

Table 2 also shows that in these hospitals the library budget is a very small percentage of the total hospital budget. The modern hospital assumes, of necessity, a very much larger responsibility than formerly in the care and treatment of its patients and undertakes to supply these patients with many things which until recently were not regarded as a necessary part of hospital care and treatment. The installation of separate telephones, radio outlets in every room, employment of a librarian and visits of social service workers represent accessories in hospital service

beyond the cost of medical service. Each of these accessories must be weighed as to its cost in relation to the benefits received by the patients and in relation to the other needs of the hospital which are perhaps more pressing. In such a scheme books represent, in proportion to their cost, one of the most valuable accessories to hospital service.

Personnel

The size and type of hospital are the chief determinants of the number of librarians. Mental hospitals, tuberculosis sanatoriums, orthopedic and children's hospitals require approximately one-third more service than patients in general hospitals. Local conditions such as the physical layout of the hospital and aid received from nearby libraries are also considered in the personnel requirements of a patients' library.¹

Of the ten answers received to the question of the number of librarians employed, only four of the hospitals meet the hospital library standards in allowing a minimum of from two to five professional librarians and a minimum of one or more clerical assistants as required for over five hundred beds serviced. Only three hospitals listed part-time workers in the library, but no mention was made of the type of work they perform.

This situation is unfortunate as the provision of extra help in the library makes it possible to render more satisfactory service to patients by establishing regular hours for ward visits, classifying and cataloging materials, and doing publicity work. With this arrangement the trained librarian has more time to examine books and other materials that may be of use to the hospital population.

¹"Objectives and Standards for Patients' Libraries," Medical Library Association Bulletin, (October, 1952), pp. 389-397.

Of the eight answers received to the question of the training of the patients' librarian, it was found that four of the librarians are graduates of library schools and four are non-professionals. Since the patients' librarian is part of the medical staff of the hospital, too much emphasis cannot be placed on the necessity of having an understanding of the nature of illnesses and their psychological and emotional effects upon people. In nearly all patients' libraries, the staff is so small that the librarians must have broad professional competence to handle all aspects of the work. This is in great contrast to academic or public libraries where the work is generally so organized that librarians specialize in reference, circulation, or processing.

A knowledge of the content of books is the first essential for the patients' librarian for the chance of giving the wrong books to patients will be minimized if the story is familiar to the librarian. Much depends upon getting the right book to the right person in every kind of library, but in the hospital, where the books should have a curative value, it is of the greatest importance to select the right book. This selection of the right book will not only be of great satisfaction to the patient, but will promote the library service among the patients for there is no better advertisement of anything than satisfied enthusiastic patrons. In the general hospital where the population changes so fast, an enthusiastic reader in the next bed will initiate the new patients into the book borrowing habit.

The successful hospital librarian needs more than a knowledge of books and library methods. She should be specially trained to work with patients. She must be adjustable and cooperative, and have some knowledge of hospital procedure, for the organization of the hospital is a very sensitive and complex affair and the library must fit into its proper niche.

The need for professionally-trained library workers is further illustrated by the fact that hospital authorities cannot permit personal information about patients to be available to untrained workers in the library. It would be a breach of professional ethics to give such information to those other than professional people whose business it is to respect such confidences. The trained librarian whose standing is professional is entitled to this information; in fact, she must have it if she is to give the proper kind of service. The entire lives of many patients must be readjusted as a result of physical and psychological changes attendant upon their hospitalization. The assistance which the librarian can give should not be left to the judgment of untrained personnel. The trained librarian will have an understanding of inter-human relations which will enable her to classify her patients. She will endeavor to work out a practical program always with the thought in mind that the patient is a person and is ill.

The compensation of librarians is also important. Of the five answers received to the question to determine whether or not the salary of the professionally-trained librarian was equal to that of the professionally-trained persons in the social service and therapy departments, only one librarian's salary was equal. This salary was listed as \$4,740.00 annually. One librarian received a higher salary than the occupational therapist or the social worker and this salary falls within the range of from \$3,423.00 to \$4,300.00 annually. Although three librarians receive lower salaries than the workers in the other two departments, only one of these hospitals listed the salary of the librarian and this salary falls within the range of from \$3,306.00 to \$4,000.00 annually. The only salary listed for a non-professional librarian was \$2,200.00 annually.

Summary

The practice of incorporating the library as one of the therapeutic agencies of the hospital has been slow to develop. Of the 18 questionnaires completed and returned only 11 hospitals indicated that library service was available to patients in those hospitals. In two of these hospitals the patients' library was not founded until over two hundred years after the founding of the hospital. The shortest span of time between the founding of the hospital and the patients' library was eleven years.

There seems to be a trend to provide some type of library service for patients even though the performance does not meet all the hospital library standards of the American Library Association. Five of the 11 hospitals use the unit system whereby the library is a department of the hospital and each library hires its own librarian and builds its own book collection. Five other hospitals use the public library system whereby the public library assigns librarians from its staff to service the hospitals and provides books on a loan basis for the hospital book collection. Some of the larger hospitals operating under this system have a number of volumes as a permanent collection. Two of the hospitals present library service through the aid of volunteer workers from the community.

For hospitals as a whole, tax funds constitute the largest single source of income. Seven of the 18 hospitals receive support from city tax funds, five from county funds, two from the state funds, two from nonprofit organizations, and two from both city and county tax funds. Only ten hospitals supplied information concerning their total hospital budgets. Each of the total budgets showed an increase each year for the three year period 1950-1952. Yet only one of the four library budgets shows an increase for the same period of time. Since the actual amounts of the public

library funds were not listed no comparison can be made between the library budgets of those libraries operating under the unit plan and those operating under the public library system.

One of the greatest problems in the administration of patients' libraries is to bring before hospital administrators and governing boards the great need for trained librarians to carry on hospital library service. Only four of eight librarians are graduates of library schools. Only two of these four librarians receive a salary equal to or higher than that of professionally-trained persons in the social service and therapy departments.

A tremendous job lies ahead in educating hospital executives as to what the library situation should be in their hospitals and in stimulating the cooperation of the public library administrators.

CHAPTER III

MATERIALS COLLECTIONS

The patients' library materials collection should be the same well-rounded collection as should be maintained in a public library of similar size. There should be an adequate supply of fundamental reference books, standard book selection aids, current periodicals, a normal balance between fiction and non-fiction, a liberal amount of the classics in good editions, vocational and rehabilitation aids, material on current affairs, and above all the collection should be up-to-date and in good physical condition.¹ This chapter will attempt to show how well the materials collections of the selected hospitals meet the foregoing standards.

Selection of Materials Collections

Of the six answers received to the question as to how books are secured, if not supplied by the public library, three hospitals stated that the majority of the books were purchased, and some were secured by donation. The other three hospitals of the six answering stated that their books were secured by donation alone. The remaining five hospitals, providing library services for patients, operate under the public library system and therefore answer the question.

As to purchase new books, replace old ones, and provide materials are indispensable to the patients' library. By

¹ "Standards and Standards for Hospital Libraries and Librarians,"
J. Am. Lib. Ass., XXVII (March, 1945), pp. 172-175.

purchasing books for the library collection the librarian is usually able to secure the books specifically requested by the patients. If a patient repeatedly asks for a book and does not receive it merely because it is not included in the library collection, he often loses faith in the library and stops using it. The library can be kept more up-to-date if new books are purchased regularly, rather than having to wait until they are donated.

Books secured by donation alone are seldom satisfactory as they include so many old books, worn books, and books not suited to hospital needs. Old books have much to recommend them to the scholar, the historian, and the research worker, and are invaluable in a modern public library, but they have little place in the hospital library collection. If the need for such a book arises it can be filled by the public library. Worn-out or dilapidated books have no place in the hospital library for a patient may think the librarian is in the business of serving worn-out books to worn-out people. There is a psychological effect in the appearance as well as the content of a book.

Sources of selection.--The five major lists, in order of frequency, used for book selection in the hospitals surveyed are:

1. Saturday Review
2. New York Times Book Review
3. New York Herald Tribune Book Review
4. Hospital Book Guide
5. Publishers' Weekly

The Saturday Review and the New York Times Book Review were each mentioned four times, while the New York Herald Tribune Book Review, Hospital Book Guide, and Publishers' Weekly were each mentioned three times. Booklist, New York State Library Bookmark, and Library Journal were each mentioned twice. The United Hospital Fund List was mentioned only once. It is surprising to note that those lists designed especially for hospital

library book selection, Hospital Book Guide and United Hospital Fund List, are not used more extensively. The other book reviews and lists for ourrent literature do not evaluate books from a hospital standpoint, nevertheless these reviews may prove helpful to the librarian who has ample time to read them and will not base her judgment on reviews alone.

Book Collections

The number of books in the permanent book collection should be based on the hospital population. In medical parlance the term "hospital population" means the number of patients admitted during the year. However, the total number of patients passing through a hospital annually does not give a true picture of the number of patients treated daily, especially in a large general hospital with a quick turnover. To illustrate, the large general hospital may report a population of 15,000 patients for a year while it has only 500 beds. The hospital caring for mental, tubercular, or other more or less chronic cases with 500 beds, can report not many more than that number of patients a year. It is obvious, however, that the librarian in the latter hospital gives more actual, personal advice to the 500 patients under her daily ministrations than does the librarian in the general hospital reporting 15,000 patients, many of whom are hospitalized for such short periods of time that there is no possibility of any but the most casual book service. For example, no more librarians or books are needed for 50 patients occupying the same bed in succession for 50 weeks than for one patient occupying the same bed for 50 consecutive weeks. It would seem then that the patient population the library serves should be based on the number of beds in the hospital.

Seven hospitals listed the total number of volumes in their book collections. These are shown in Table 3 together with the minimum number of

volumes they should have according to the hospital library standards. These standards are based on the bed capacity of the hospitals. For example, general hospitals of from 801 to 1,100 beds should have a minimum of 5 books per patient or from 160 to 220 volumes in their collections. Hospitals of 1,101 to 1,500 beds should have a minimum of 4 books per patient, or 276 to 350 volumes in their collections.

TABLE 3

EVALUATION OF BOOK COLLECTIONS AS COMPARED WITH STANDARDS*

| Hospital | Bed Capacity | Number of Volumes in Book Collection | Number of Volumes According to Standards |
|----------|--------------|--|---|
| A | 3,837 | 15,000 | 960 |
| B | 3,400 | 1,000 | 850 |
| C | 2,820 | 2,500 | 705 |
| E | 1,047 | 3,000 | 209 |
| G | 850 | 1,778 | 170 |
| I | 741 | 2,135 | 123 |
| J | 2,910 | 6,100 | 722 |

*"Objectives and Standards for Patients' Libraries," Medical Library Association Bulletin, XL (October, 1952), pp. 389-397.

From this table it can be seen that the book collections of the seven reporting hospitals are well above the minimum number of books stated in the standards for hospitals of their size.

Classification of book collections.--Only five of the selected hospitals listed the number of books in each class that are held in their patients' libraries.

According to Table 4 all of the five hospitals list more fiction books than any other kind. Hospitals A and F hold fewer religious books than any other class in their collections. Hospitals F and J list fewer

social science books than any other class while hospital I lists fewer reference books. Generally speaking hospitals A, F, and J have more books in each class than hospitals E and I. However, the latter hospital operates under the public library system and book collection may be supplemented by books borrowed from the public library. Hospitals A, E, and J operate under the unit plan and have built their own book collections.

TABLE 4
CLASSIFICATION OF BOOK COLLECTIONS OF FIVE HOSPITALS
AND NUMBER OF VOLUMES

| Class | Hospitals | | | | |
|---------------------|-----------|-------|-------|-------|-------|
| | A | E | F | I | J |
| General reference | 100 | 50 | 100 | 6 | 70 |
| Psychology | 50 | 80 | 50 | 13 | 40 |
| Religion | 30 | 80 | 40 | 45 | 300 |
| Social Science | 100 | -- | 125 | 25 | 20 |
| Science | 100 | 60 | 100 | 15 | 50 |
| Professional books* | 10,000 | -- | -- | 25 | 150 |
| Applied arts | 100 | -- | 125 | 25 | 200 |
| Fine arts | 100 | 80 | 150 | 150 | 50 |
| Travel | 100 | 270 | 450 | 100 | 250 |
| Biography | 200 | 290 | 250 | 125 | 500 |
| History | 100 | -- | 175 | 41 | 150 |
| Fiction | 25,000 | 1,200 | 3,500 | 1,350 | 3,000 |
| Children's books | 200 | -- | 450 | 200 | 500 |
| Others | | | | | |
| Humor | | 100 | | | |
| Westerns | | 100 | | | |
| Poetry | | 55 | | | |
| Foreign language | | 300 | | | |

*Books for doctors, nurses, and technicians.

Hospital A is the largest hospital among those surveyed and is the only one listing a large number of professional books for doctors, nurses, and technicians. Some of the other hospitals provide some services for the staff, but these services will be discussed in the next chapter.

Although all of the hospitals in the survey are located in large

cities with large foreign populations, only hospital E has foreign books in its collection. Foreign-speaking patients can be aided by bibliotherapy just as any other group and possibly more, as such books remove some of the language difficulties and give the non-English speaking person a release through reading something he feels at ease with and understands.¹

The ratio of fiction and nonfiction and the proportion of books in the various classes should be gauged by the type of hospital and patient. Ninety per cent of the patients in general hospitals do not need specific bibliotherapy as they stay in the hospital only a short period of time and the recreational diversional value of books is of primary importance. An adequate library to sustain the wide range of interest in a cross section of the community as represented by a hospital's population is a great task. According to Estelle Brodman there are eleven types of readers in the wards of a general hospital: (1) very sick patients, (2) apprehensive patients, (3) somewhat mentally unbalanced patients, (4) old people, (5) busy housewives, (6) mothers, (7) businessmen, (8) young children, (9) students, (10) adolescents, and (11) nonreaders--in other words the whole gamut of humanity.² These patients want all kinds of books since they come from all walks of life. Therefore, an effective library service must be prepared to meet the needs of everyone from the unlearned, whether native or foreign-born, adult or juvenile, to the most highly educated.

From the facts presented in Table 4 it would seem that the selected hospitals are, generally speaking, providing a sufficient number of books in each class to serve the patient readers of each hospital.

¹A. I. Bryan, "Can There Be a Science of Bibliotherapy?" Library Journal, LXIV (October, 1939), pp. 773-776.

²Estelle Brodman, "Patients Do Read," Special Libraries, XXXIII (November, 1942), pp. 329-331.

Periodicals

Each of the hospitals surveyed receives periodicals regularly, some by gift and donation, others from the Red Cross, some by subscription. Each hospital was asked to send a list of periodicals received regularly, but only two hospitals responded. However, the lists which they sent were lists of medical journals instead of periodicals for the patients' libraries.

Periodicals are a very important and necessary part of every patients' library and often serve as a steppingstone to a book. Many patients find it easier to read a magazine with short stories and articles than a book calling for consecutive reading and long spans of attention. People from the lower income groups fill many of the beds in the general hospitals and they are often more in need of mental occupation than others because they have fewer resources within themselves. Yet these same patients will not use the library because they cannot understand adult prose and are too proud to read children's books which are really beneath them in content, but written in a phraseology and style easily understood. But for fear of ridicule of other ward patients they will not choose these books, but turn instead to magazines with pictures.

The benefits derived from reading these books and periodicals are far too intangible to chart. A statement of the results obtained in an activity of this character cannot be made in exact terms. Such an activity does not readily lend itself to a statistical explanation of its results. This is unfortunate because when one seeks to obtain funds for this purpose, one is always met with the inquiry as to what has been accomplished. To those engaged in such work, the results are obvious. The things achieved are not such tangible things as can be weighed, measured, or estimated in columns of figures and yet they have a value none the less important.

Since the selected hospitals did not send the requested lists of their periodicals received regularly, it is impossible to tell whether or not their collections are adequate. In a general hospital where the patients come from all walks of life it is necessary to have periodicals suitable to everyone, such as, cultural and popular, scientific, current events, travel, home and garden, nature, fishing, hunting, short stories, and humor.

Audio-Visual Materials

There are several types of audio-visual materials used in the hospitals surveyed. Eight report the use of braille books for the blind. Two other hospitals use talking books in addition to the braille books. These talking books are especially good for the blind who have never learned to read braille. After much study and experimentation the phonograph records have been adapted to the purpose of recording printed books. A volume of average size can be read in about nine hours. It takes twelve to fifteen twelve-inch records to record such a volume.

Three hospitals provide projectors designed to focus the image of film on the ceiling. The projector is a small compact machine which is simple to use. The control panel has two large flat buttons that are pressed to move the pages of the book forward or backward. If the patient cannot control his finger movements well enough to exert the slight amount of pressure required, he can press the buttons with his elbow, his chin, or his toes. These projected books fill a distinct need in the hospital life of many patients who are forced to lie flat on their backs.

Two hospitals report the use of Reclino-Specs. These are the new right-angle vision glasses which permit upright vision while lying down.

One hospital reported that these glasses are rented for the period of hospitalization to ward patients for fifty cents and to private patients for seventy-five cents.

Summary

Because of the fact that hospital patients are members of the community who are temporarily deprived of the advantages of the library and in many instances are in greater need of books than the normal citizen it is essential that the patients' library should contain the same well-rounded collection as should be maintained in a public library of similar size. Five of the 11 hospitals secured their books from the public library, three secured their books through purchase and donation, and three secured their books through donation alone.

Book selection which is important in any library is especially important in the hospital library where books are selected to meet the demands of bibliotherapy and of readers' interests. The sources of book selection, in order of frequency, are: Saturday Review, New York Times Book Review, New York Herald Tribune Book Review, Hospital Book Guide, and Publishers' Weekly.

The book collections of the seven reporting hospitals are well above the number of books stated in the American Library Association Hospital Library Standards. All of the hospitals list more books in the fiction class than in any other. Only one hospital lists a large number of professional books for the medical staff. Generally speaking the selected hospitals are providing a sufficient number of books in each class to serve the patrons of the patients' library.

Since the hospitals did not send the requested list of periodicals received regularly it is impossible to compare the collections of each

hospital. However, each hospital receives a number of periodicals regularly.

The use of audio-visual materials in the selected hospitals seems to be very limited. Eight hospitals report the use of braille books for the blind and two also list the use of talking books in addition to the braille books. Three hospitals provide projected books and two hospitals use the new Reclino-Specs.

CHAPTER IV

LIBRARY USE, ORGANIZATION AND SERVICES

In addition to describing the library quarters, the organization of the library materials, the records of the patients' libraries, this chapter presents an analysis of the use of the library and the library materials in light of the American Library Association Hospital Library Standards in regard to location of the library, the hours of use, ward service, and special services to patients and hospital staff.

Library Quarters

Of the seven answers received to the question of the location of the library, four of the hospitals have their libraries on the first floor of the hospital. Two hospitals have placed the library in the basement and one library is located on the top floor of the hospital.

According to the American Library Association Hospital Library Standards the library should be restricted to library activities and not used as a conference room or laboratory of one kind or another. Accessibility is a basic requirement so that ambulatory patients will not have too far to walk and wheel-chair patients can gain easy entrance to the library. The library should be centrally located in the hospital or wherever large groups of patients gather.¹ From the answers received, it would seem then that six of the 11 hospitals providing library service for patients are

¹"Objectives and Standards for Patients' Libraries," Medical Library Association Bulletin, XL (October, 1952), pp. 389-397.

meeting the standards for accessibility, as the first floor and the basement of the hospital are easily accessible and are generally the center of activity where large groups of people gather.

It is also very important that the library room or rooms be as light, pleasant, and attractive as possible. Reading tables, comfortable chairs, and a quiet homelike atmosphere conducive to reading will offer to ambulant patients the feeling of having left hospital walls behind. In the general hospital the ambulant patient should be encouraged to visit the library for the visit outside his ward may provide him, not only with reading material, but also with that lift in spirit and the feeling of self-dependence so necessary in fostering the desire for recovery. Thus it is important that the hospital provide a library room where patients may visit and browse, but of the ten answers received to the question only three hospitals provide such a room.

Hours of Use

Table 5 shows the hours the library is open for use and how many hours the librarian is on duty. Hospitals A, D, and J are open at least 12 hours per day, with a librarian on duty in two of the hospitals eight hours per day. An assistant librarian is on duty the remaining four hours. In hospital G the library is only open for five hours while a librarian is on duty eight hours. The extra three hours may be spent in work on the wards, publicity, or other duties, but the library is only open when the librarian is on duty in the library. This same policy may also apply to hospital C where the library is only open six hours per day with a librarian on duty in the hospital for seven hours. Hospitals A and E are the only two hospitals listing Saturday hours. This may be due to the fact that patients generally have more outside visitors on week ends and have little time for reading.

TABLE 5

LIBRARY HOURS AND HOURS PER DAY LIBRARIAN IS ON DUTY

| Hospital | Library Hours of Opening | Librarian Hours of Duty |
|----------|------------------------------|----------------------------|
| A | 9 A.M. - 9 P.M. ^a | 8 |
| B | 9 A.M. - 5 P.M. | 8 |
| C | 11 A.M. - 5 P.M. | 7 |
| D | 9 A.M. - 9 P.M. | - ^b |
| E | 9 A.M. - 5 P.M. ^c | 8 |
| G | 8 A.M. - 1 P.M. | 8 |
| I | 8 A.M. - 5 P.M. | 8 |
| J | 9 A.M. - 10 P.M. | 8 |

^aMonday through Friday hours. Saturday hours
9 A.M. to 5 P.M.

^bLibrary service is provided by volunteers
therefore hours of duty are irregular.

^cMonday through Friday hours. Saturday hours
9 A.M. to 12:30 P.M.

Ward work.--The hours of opening the library depend upon local needs and also upon how much of the librarian's time will be required for ward work with patients. The hours for ward visits are arranged between the responsible physician and the librarian to best meet the needs of all patients in that particular hospital.

The non-ambulatory patients should be visited regularly twice a week.¹ Only seven of the hospitals answered the question regarding the number of times per week ward service is given to their patients. Six hospitals give ward service once per week and one hospital gives service three times per week. Thus only one hospital is actually meeting the standards in this phase of library service.

By visiting all bed patients at least twice a week the librarian is able to give much better and more personal service than on a once a week

¹Ibid., p. 392.

basis. It is also desirable that a system be instituted to give the librarian information of new patients admitted each day. Experience has shown that the earlier the librarian knows the patient the better will be her opportunity for library service, and if the contact results in developing an interest in reading, the more favorable will be the patient's chance for a satisfactory adjustment to hospital life.¹

Library Organization and Records

In the patients' library the library technique is always as simple and unobtrusive as possible. Conventional library methods are used only when they can be adapted to streamline procedures. Simplified systems are used whenever possible to relieve the librarian of non-productive clerical work. Table 6 gives an indication of the organization of library materials and records kept in the patients' libraries of the eight hospitals answering the question.

Classification.--Two of the hospitals use the Dewey Decimal Classification system, three hospitals use the simplified Dewey Decimal Classification and one hospital classifies its books according to the Library of Congress system.

The simplified Dewey Classification system is conceded to be the most practical for hospital purposes. As a rule only three figures are used, and in some libraries, a loose classification with few subdivisions has proved satisfactory.

Card catalog.--Six of the hospitals keep card catalogs in their libraries. In most hospitals author and title cards are usually sufficient. However, for hospitals with many books and a great many nonfiction books, a

¹Elizabeth Pomeroy, A B C's for Hospital Librarians (Chicago: American Library Association, 1943), p. 8.

dictionary catalog with subject headings is recommended.

The provision of the card catalog in the hospital library enables the patients to see what material is available in the library and also aids them in securing their own reading matter when the librarian is busy with other patients or duties.

TABLE 6
ORGANIZATION OF LIBRARY MATERIALS AND RECORDS

| Hospital | Classification System | Card Catalog | Shelf List | Circulation Records | Patients' Requests |
|----------|-----------------------|--------------|------------|---------------------|--------------------|
| A | Dewey ^a | X | X | X | X |
| B | .. | X | .. | X | X |
| C | Dewey ^b | X | X | X | X |
| E | .. | X | X | X | X |
| F | Dewey ^b | .. | X | X | X |
| G | L. C. ^c | .. | .. | X | X |
| J | Dewey ^b | X | X | X | X |
| K | Dewey ^a | X | X | X | X |

^aDewey Decimal Classification system.

^bSimplified Dewey Decimal Classification system.

^cLibrary of Congress Classification system.

Shelf list.--Six hospitals keep a shelf list of books in their libraries. A shelf list facilitates the taking of inventory and in some hospitals it may be called upon to do double duty until the librarian has time to prepare a catalog. The use of the shelf list is a matter of personal choice and two of the hospitals do not keep a shelf list.

Circulation records.--All of the hospitals answering the question

seem to realize the importance of circulation records and keep these records in their patients' libraries. A daily record should be kept--by classes, if the library circulates much nonfiction. This will enable the librarian to check up on her most popular classes and help her in book purchases. It is important too that these records be exact. Because the patients are sick people they are more sensitive and if a patient is charged with a book he has already returned, it may upset him.

Patients' requests.--All of the hospitals keep a record of patients' requests. Here too, it is important that the records be exact. If a patient asks for a book and does not receive it, he loses confidence in the librarian's real interest. The patients appreciate having their particular tastes in literature noted by the librarian and it makes them feel that the librarian is taking a personal interest in their welfare.

Patients

Table 7 shows the types of patients admitted to the thirteen hospitals answering the question, as hospitals F, J, L, N, and P did not list the types of patients admitted.

Hospital A admits general patients only. This may be attributed to the fact that it is located in one of the largest cities in the United States and there are special hospitals provided for patients suffering from the other diseases. All hospitals except A and E admit surgical, cancer, tubercular, and orthopedic patients. Only two hospitals, G and I, admit convalescent cases. This may be due to the fact that most hospitals are not able to take such cases because of the shortage of nurses, doctors, and space. The majority of ailments treated in these hospitals surveyed are of an acute character. General hospitals have been gradually developing services in the various specialties of medicine and surgery, thus

TABLE 7

TYPES OF PATIENTS ADMITTED TO SELECTED HOSPITALS

| Hospital | Surgi- cal | General | Cancer | Convales- cent | Drug and Alcoholic | Epilep- tic | Tuber- cular | Men- tal | Ortho- pedic | Venereal |
|----------|---------------|---------|--------|-------------------|-----------------------|----------------|-----------------|-------------|-----------------|----------|
| A | ... | X | ... | ... | ... | ... | ... | ... | ... | ... |
| B | X | X | X | ... | X | ... | X | X | X | ... |
| C | X | X | X | ... | X | X | X | X | X | X |
| D | X | X | X | ... | ... | X | X | X | X | X |
| E | ... | X | ... | ... | ... | ... | ... | ... | ... | ... |
| F | * | * | * | * | * | * | * | * | * | * |
| G | X | X | X | X | X | X | X | X | X | X |
| H | X | X | X | ... | ... | X | X | X | X | X |
| I | X | X | X | X | X | X | X | X | X | X |
| J | * | * | * | * | * | * | * | * | * | * |
| K | X | X | X | ... | ... | X | X | X | X | X |
| L | * | * | * | * | * | * | * | * | * | * |
| M | X | X | X | ... | X | X | X | X | X | ... |
| N | * | * | * | * | * | * | * | * | * | * |
| O | X | X | X | ... | ... | X | X | X | X | X |
| P | * | * | * | * | * | * | * | * | * | * |
| Q | X | X | X | ... | X | X | X | X | X | X |
| R | X | X | X | ... | ... | ... | X | ... | X | X |

* Types of patients not given.

they now include patients which formerly would have been admitted only to special hospitals.

In a study of supervised reading as an aid in the treatment of patients in the Veterans' Administration hospitals, it was found that the patients who read tend to be more contented and are therefore more amenable to hospitalization. Patients undergoing treatment for tuberculosis are also more likely than others to be benefited by having interests aroused and widened through selected reading. Reading also tends to help mental patients to become less emotional and to think more wholesomely.¹ Yet all types of patients in the hospitals are gratified in being able through reading to keep in touch with the world outside the hospital. This contributes to their self-respect and to an improved perspective.

Types of literature read.--No one type of literature can offer equal diversion to all types of patients, but one law applies equally to all types of literature; it must be something the patient wants to read. Table 8 shows the most popular types of literature read in nine of the selected hospitals and frequency with which they were mentioned.

An impaired body has a very definite effect upon the intellectual efficiency and the emotional stability of the patient. In sickness the delicate complex balance between the mind and the body is destroyed. Most sick people are unable to fasten their attention on any book which takes steady concentration because their minds insist upon darting from one topic to another. Thus books which require study presuppose a mental alertness and an intellectual stamina which few people in ill health possess.² Patients

¹Elizabeth Pomeroy, "Bibliotherapy--a Study in Results of Hospital Library Service," Medical Bulletin of the Veterans' Administration, XIII (April, 1937), pp. 360-364.

²Kathleen Payne, "The Librarian Goes to the Hospital," Wilson Library Bulletin, XV (February, 1941), pp. 504-507.

have no desire for heavy reading, they wish to be diverted, amused, or transported to fields in the imagination more pleasant than the one they occupy on the hospital bed. This explains the great popularity of fiction books.

TABLE 8

MOST POPULAR TYPES OF LITERATURE
READ BY GENERAL HOSPITAL PATIENTS

| Types of Literature | Frequency |
|------------------------|-----------|
| Fiction | 9 |
| Travel | 7 |
| Religion | 7 |
| Biography | 6 |
| Poetry | 3 |
| History | 1 |
| Science | 1 |
| Psychology | 1 |
| Humor | 1 |

The subject of greatest popularity among books in the nonfiction class is travel. This interest stands at the top with all types of patients. This seems proof of the universal desire to be up and away from hospital surroundings mentally even though this is not physically possible; indicating as well a wholesome curiosity about how other people live and what they are doing.¹

During illness the point of view very easily becomes distorted. Anxieties and fears that are usually lurking in the background of the mind become magnified and creep into the foreground. Insecurity of the future, the inroads that illness makes on finances, physical discomfort, and long periods of comparative isolation combine to develop psychological attitudes

¹ Elizabeth Pomeroy, "Bibliotherapy -- a Study in Results of Hospital Library Service," Medical Bulletin of the Veterans' Administration, XIII (April, 1937), pp. 360-364.

that are harmful. For help and guidance during this period many patients turn to the Bible and other religious books.¹

Biography is popular because patients somehow gain confidence from reading about what other people have accomplished, oftentimes against far greater odds than they themselves are facing or have ever faced. Such books may also be a useful antidote for the self-pity which poisons so many sick people. Narratives in which the hero successfully overcomes obstacles are especially helpful. Identifying themselves with these individuals often gives invalids the hope and fortitude which they need to continue their own struggle.²

Poetry which leaves a thought to be remembered, either humorous or inspirational, is soothing mentally. In seeking comfort when the mind is beset with many worries and the body is racked with pain, it is simpler to recall a rhymed thought than a prose passage.³

Humorous books are low on the list because those books that normally offer great appeal to readers frequently fall flat with many patients because the humor often hinges on situations that are almost bizarre and the very points that would ordinarily seem extremely funny become irritating.⁴

Types of magazines read.--Table 9 gives the list of the most popular magazines read in the hospitals and the frequency with which they were mentioned.

¹Eric K. Clarke, "Books for the Convalescent," Library Journal, LXII (December, 1937), pp. 893-895.

²R. Hyatt, "Book Service in a General Hospital," Library Journal, LXV (September, 1940), pp. 684-687.

³Elizabeth Pomery, A B C's for Hospital Librarians (Chicago: American Library Association, 1943), p. 12.

⁴Eric K. Clarke, op. cit.

TABLE 9

MOST POPULAR MAGAZINES READ BY
GENERAL HOSPITAL PATIENTS

| Magazine | Frequency |
|------------------------------|-----------|
| <u>Life</u> | 7 |
| <u>Readers' Digest</u> | 5 |
| <u>National Geographic</u> | 3 |
| <u>Saturday Evening Post</u> | 3 |
| <u>Ladies' Home Journal</u> | 3 |
| <u>Look</u> | 1 |
| <u>Photoplay</u> | 1 |
| <u>Outdoor Life</u> | 1 |
| <u>True</u> | 1 |

Others listed by the nine hospitals were western magazines, detective stories, fashion magazines, and home magazines.

Life magazine has been called the answer to the librarian's prayer because of pictures and low cost. The articles in the Readers' Digest are short and do not require long periods of concentrated reading. National Geographic satisfies the desire for more pleasant surroundings through its many pictures of faraway places. The Saturday Evening Post and the Ladies' Home Journal both furnish light recreational reading material.

Introduction to the library.--In the eight answers received to the question as to how the patients are first introduced to the library, four hospitals listed the fact that this was done by the book cart going through the wards and rooms. Two hospitals use the personal visit of the librarian and the book cart to introduce the service. One hospital listed the use of the book cart along with the recommendation of the doctor and the recommendation of the nurse that the patient use the library.

When patients' libraries were first considered, something had to be invented to transport books to patients on remote wards. In 1905 the only

method of doing this was to pack the books into laundry baskets and have them carried by porters or ward attendants. Patients did not have lists or expect to see books for selection, they took what they could get. By 1910 this method was inadequate and in the Massachusetts General Hospital, Dr. F. A. Washburn designed a book cart. This cart had only one tray which was mounted on three wheels. Yet it was light in weight and easily handled.¹ Thus we have the beginnings of the book cart which seems to play such an important part in introducing the library service to patients.

Experience has shown that many patients unaccustomed to hospital library service will think there is a charge if the library is used and so may, for this reason, strive to appear uninterested in the books on the book cart. Therefore, the librarian should take time to introduce the library service personally and if an information leaflet can be left with the patient for his reference, it is much better for all concerned. This will serve to acquaint him with the location of the library, the hours it is open, and the specific times the librarian will visit the various wards with the book cart. Information about the many subjects covered by the books in the library may also be included in the leaflet and a sentence or two of welcome into the family of hospital readers may cause the new patients to feel at home in strange surroundings.

It is very helpful to the librarian when the doctors and nurses take an interest in the library and recommend it to patients. Many patients are unaware of the therapeutic value of books and would never think of using the library if it were not suggested by the doctor or nurse as an aid to recovery.

¹E. Kathleen Jones, Hospital Libraries (Chicago: American Library Association, 1939), p. 134.

Special Services

Patients.--Only five of the hospitals listed special services for patients. Two of these hospitals conduct book review programs for the patients and one provides a story hour for the children in the hospital. The other hospital provides disposable magazines for isolated patients.

This general lack of special services may be due to the relatively small staffs of the patients' libraries or the lack of professionally-trained librarians. The hospital administrators may be unaware of the value of such services and therefore fail to provide for them in the library budgets.

In answer to the question of library service to patients after they leave the hospital, ten answers were received with only one hospital providing such a service. This hospital provides projected books if needed by the patients after they return to their homes. Here, too, the librarian may be unable to render library service after the patients leave the hospital because of limited staff and/or facilities. But she should do whatever she can to assure that upon returning to his home the patient will patronize his public library and continue the reading habits formed while a patient. Patients who never before used a public library and who become accustomed to the homelike atmosphere of the hospital library often seem a trifle awed by the larger institution, the public library. In such cases the hospital librarian should try to make the step from the hospital to the public library an easy one thus extending the library's influence beyond the walls of the hospital and along the way the former patient will travel.

Staff.--Only one hospital provides special services for the doctors, nurses, and technicians. This is hospital A which as shown in Table 4 of Chapter III includes 10,000 professional books in its book collection. This

hospital also provides bibliographic and reference work for doctors, special instructions to nurses on the use of the library, and prepared booklists of the new arrivals for the medical staff.

In four of the other hospitals, the staff is privileged to use the library whenever it does not conflict with service to patients. In two hospitals the staff members pay a fee for library service.

Summary

Six of the 11 hospitals providing patient's libraries seem to be meeting the American Library Association Hospital Library Standards in regard to accessibility of the library as four of the hospitals have the library on the first floor and two libraries are in the basements of the other hospitals. Only three hospitals have a library room where patients may visit and browse.

Three of the patients' libraries are open at least 12 hours per day. In two of these hospitals an assistant librarian is on duty when the regular librarian is not there. Most of the librarians work eight hours per day. Only two hospitals maintain library hours on Saturday.

Of the seven answers received only one hospital is meeting the requirements of maintaining ward service twice a week. The Dewey Decimal Classification system is the most widely used system in eight of the hospitals. One hospital uses the Library of Congress Classification system. Most of hospital libraries maintain a card catalog, circulation records, and records of patients' requests.

The majority of the patients admitted to the selected hospitals are general and surgical cases, next listed in order of frequency are: tubercular, orthopedic, and mental cases.

The five most popular types of literature read are: fiction, travel,

religion, biography, and poetry. The five most popular magazines read are: Life, Readers' Digest, National Geographic, Saturday Evening Post, and Ladies' Home Journal.

In a majority of the hospitals the book cart going through the wards and rooms serves to introduce the library service to the patients. Only five of the 11 hospitals provide any type of special services for the patients. The services provided by these hospitals are book review programs, story hours for the children and disposable magazines for isolated patients. Only one of the 11 hospitals provides special services for the staff. These services include bibliographic and reference work for the doctors, special instructions to the nurses on the use of the library, and booklists of new arrivals for the medical staff. Four of the 11 hospitals permit the staff to use the patients' library, although in two of these hospitals the staff is required to pay a membership fee.

CHAPTER V

SUMMARY AND CONCLUSIONS

This study has sought to present a picture of the administrative organization, facilities, and services of the patients' libraries in forty of the largest general hospitals in the United States, with the exception of those general hospitals operated by the Federal Government under the supervision of the Veterans' Administration.

Findings

The idea of providing library service in hospitals began in the Egyptian, Greek, and Roman temples. The first hospital medical library to be established in the United States was the library at the Pennsylvania Hospital in Philadelphia in 1762. In 1821 a movement was begun to establish a library for the patients in the Massachusetts General Hospital in Boston. The value of hospital library service was demonstrated and its development quickened by World War I. Through the American Library Association hospital war service standardized library service was developed in the Veterans' Administration hospitals, the navy and the army. World War II brought renewed interest in the therapeutic effect of reading.

In spite of this early beginning the patients' library as administered today is considered a recent development in the library field and its value is as yet not fully recognized everywhere. Eighteen of these 40 largest general hospitals completed and returned the questionnaires. Eleven of them specified that some type of library service was provided for patients. One

hospital did not complete the questionnaire but indicated by letter that library service for patients was provided in the hospital. Five hospitals use the unit library system, five use the public library system, and two provide library service through the use of volunteer workers.

The majority of the hospitals are supported by tax funds from the city, county, state, or city-county governments. In accordance with the standards of the American Library Association a budget is provided for each patients' library. Four hospitals allocate funds from the total hospital budget for the library and five hospitals have their library budgets allocated from the public library funds. Although the total hospital budgets show an increase each year, the hospital authorities have not seen fit to increase the library budgets for the same period, except in one hospital. This is done in spite of the fact that the cost of books, periodicals, and other materials for library use has increased the same as materials for general hospital use.

The staffs of the patients' libraries of the hospitals are very small with only four out of eight librarians professionally trained. Only two of these librarians received salaries equal to or higher than those received by professionally trained workers in the social service and therapy departments.

The books for the hospital library collections, other than those received from the public library, are secured by purchase and donation or by donation alone. When measured by the American Library Association Hospital Library Standards the book collections of the seven hospitals listing their book collections are adequate in size. Periodicals which are an important part of any library collection are received regularly in each of the patients' libraries.

The library quarters in six of 11 hospitals are located in convenient

and easily accessible places, four are on the first floor of the hospital and two are in basements.

The hours of the library are similar to those of a public library. The majority of the librarians are on duty eight hours per day. Only one hospital out of seven meets the standards in providing ward service twice a week.

The Dewey Decimal Classification system is the most widely used system in eight of the hospitals. Only one library listed the use of the Library of Congress system. Most of the hospital libraries maintain a card catalog, circulation records, and records of patients' requests.

The majority of the patients admitted to the hospitals in the survey are general and surgical cases, next in order of frequency are tubercular, orthopedic, and mental cases. The five most popular types of literature read by the patients in the general hospitals are: fiction, travel, religion, biography, and poetry. The five most popular magazines read by the patients are: Life, Readers' Digest, National Geographic, Saturday Evening Post, and Ladies Home Journal.

Only five of the 11 libraries provide special services for the patients. These services include book review programs, story hour programs for the children, and disposable magazines for isolated patients. Only one of the 11 libraries provides special services for the hospital staff. This hospital prepares booklists of new arrivals for the medical staff, gives special instructions to the nurses on the use of the library, and provides bibliographic and reference work for the doctors. Four of the 11 hospitals permit the staff to use the patients' library, although in two of these hospitals the staff members are required to pay a library fee.

Conclusions

Since replies were received from only twenty-three out of 40 hospitals and all questions listed on the questionnaires were not completed, it is difficult to draw many conclusions about the patients' libraries in the largest general hospitals. However, a few conclusions may be drawn from the information gathered from the questionnaires which were completed.

1. There is a trend to provide some type of library service for patients in the general hospitals although the performance does not meet all the hospital library standards of the American Library Association.

2. The patients' library should receive more consideration and support from the administrators and policy makers of the hospitals. It should be regarded as a department of special therapeutics and the librarian should rank with the directors of similar departments.

3. Continued efforts should be made to increase the number of organized libraries in hospitals and greater emphasis should be placed upon securing hospital librarians with professional training.

4. Librarians themselves must do their part to educate the public as to the nature and importance of hospital library service.

5. Statistics show that one of every ten persons in the population of the United States is admitted annually to a hospital.¹ A hospital population needs a library for the same reasons that other communities need one, therefore it is essential that books be provided for them.

6. Public libraries should take a more active part in providing library service for hospitals, as hospital patients are still members of the

¹E. H. L. Corwin, The American Hospital (New York: The Commonwealth Fund, 1946), p. 199.

community even though they are ill. The informality and friendliness of the hospital setup affords one of the best avenues through which new friends are gained for the public library.

7. A further study could be made to determine whether or not the smaller general hospitals are making an effort to provide library service for patients.

8. More research is needed in the hospital divisions of the public libraries. A survey could be made of a group of public libraries providing service for hospitals to determine the extent and to some degree the quality of this service. Merely providing books for hospitals is not true library service.

9. A tremendous job lies ahead in educating hospital executives as to what the library situation should be in their hospitals and in stimulating the cooperation of the public library.

APPENDIX I

COMPLETE LIST OF HOSPITALS SURVEYED

| | |
|-----------------------------------|----------------------------|
| Anker Hospital | St. Paul, Minnesota |
| Baltimore City Hospital | Baltimore, Maryland |
| Bellevue Hospital | New York, New York |
| Boston City Hospital | Boston, Massachusetts |
| Charity Hospital | New Orleans, Louisiana |
| Cincinnati General Hospital | Cincinnati, Ohio |
| City Hospital | Cleveland, Ohio |
| Confederate Memorial Hospital | Shreveport, Louisiana |
| Cook County Hospital | Chicago, Illinois |
| Denver General Hospital | Denver, Colorado |
| Edward J. Meyer Memorial Hospital | Buffalo, New York |
| Gallinger Municipal Hospital | Washington, D. C. |
| Good Samaritan Hospital | Cincinnati, Ohio |
| Grady Hospital | Atlanta, Georgia |
| Hahnemann Hospital | Philadelphia, Pennsylvania |
| Hartford Hospital | Hartford, Connecticut |
| Homer G. Phillips Hospital | St. Louis, Missouri |
| Indianapolis City Hospital | Indianapolis, Indiana |
| Jersey City Hospital | Jersey City, New Jersey |
| Johns Hopkins Hospital | Baltimore, Maryland |
| Kings County Hospital | Brooklyn, New York |
| Los Angeles County Hospital | Los Angeles, California |

| | |
|-------------------------------------|----------------------------|
| Mercy Hospital | Pittsburgh, Pennsylvania |
| Metropolitan Hospital | New York, New York |
| Milwaukee County Hospital | Milwaukee, Wisconsin |
| Mt. Sinai Hospital | New York, New York |
| Newark City Hospital | Newark, New Jersey |
| New York Hospital | New York, New York |
| New York City Hospital | New York, New York |
| Philadelphia General Hospital | Philadelphia, Pennsylvania |
| Presbyterian Hospital | New York, New York |
| Queens General Hospital | Jamaica, New York |
| St. Francis Hospital | Pittsburgh, Pennsylvania |
| St. Louis City Hospital | St. Louis, Missouri |
| St. Mary's Hospital | St. Louis, Missouri |
| San Francisco Hospital | San Francisco, California |
| State of Wisconsin General Hospital | Madison, Wisconsin |
| University Hospital | Ann Arbor, Michigan |
| University Hospital | Cleveland, Ohio |
| Youngstown Hospital | Youngstown, Ohio |

APPENDIX II

QUESTIONNAIRE A. FOR HOSPITAL ADMINISTRATOR

1. Name of hospital _____
2. In what year was your hospital founded? _____
3. What is the bed capacity of your hospital? _____
4. What was the over-all hospital budget for:

1950 _____
1951 _____
1952 _____

5. What is the major source of support? Please check below.

| | |
|-------------|-------------------------------|
| _____ State | _____ County |
| _____ City | _____ Private Organization |
| | _____ Others, please describe |
| | _____ |
| | _____ |

6. Are library services provided for patients in the hospital?

_____ Yes _____ No

(If your answer to question 6 is "No" you will not need to complete the questionnaire. Please return it. Thank you.)

7. In what year was library service to patients started in your hospital?

8. Please check below the types of patients that are admitted to your hospital.

| | | |
|------------------|-----------------------------|--------------------------|
| _____ Surgical | _____ Cancer | _____ Drug and alcoholic |
| _____ General | _____ Convalescent and rest | |
| _____ Epileptic | _____ Tubercular | _____ Mental |
| _____ Orthopedic | _____ Venereal | |

Other (Please list) _____

9. What is the major source of financial support for the hospital library?
Please check below.

_____ General hospital budget
_____ Public library funds
_____ Gifts and donations
_____ Other

10. What amount of money was spent for the hospital library in:

1950 _____

1951 _____

1952 _____

11. What is the annual salary of the librarian? _____

12. Is the librarian a graduate of a library school? Please check below.

_____ Yes _____ No

13. If your answer to question 12 is "Yes," is the salary of that position equal to that of professionally trained persons in the social service and therapy departments? Please check.

_____ Yes _____ No

The space below is reserved for any remarks or comments which you feel might help in completing this study.

QUESTIONNAIRE B. FOR PERSON IN CHARGE OF LIBRARY

Dear Librarian:

This study of hospital library service in a selected number of general hospitals is being made as a master's thesis at the Atlanta University School of Library Service. I should be most grateful for your cooperation and the return of the questionnaire by April 30 in the enclosed self-addressed, stamped envelope. Thank you.

Sincerely yours,

Jane W. Gatliff

1. Name of hospital library _____
2. Do you have a permanent book collection? Please check below.
 _____ Yes _____ No
3. If the answer to question 2 is "Yes," approximately how many volumes are in your book collection? _____
4. Is there a library room where patients may visit and browse? Please check.
 _____ Yes _____ No
5. If the answer to question is "Yes," how many people may be seated in the room? _____
6. Where is it located in the hospital? _____
7. What are the library hours? _____
8. How many hours per day is the librarian on duty? _____
9. Is the library open when the librarian is not on duty? Please check.
 _____ Yes _____ No
10. If the answer to question 9 is "Yes," who is in charge of the library at that time? _____
11. Is the cataloging and classification of books done in the library? Please check.
 _____ Yes _____ No
12. If the answer to question 11 is "Yes," what type of classification scheme is used? Please check below.
 _____ Dewey
 _____ Dewey (simplified)
 _____ Other _____
13. What kinds of records do you keep in the library? Please check.
 _____ Circulation records
 _____ Records of patients' reading
 _____ Card catalog

☐ Shelf list
☐ Patients' requests for materials
☐ Other _____

14. How many persons are employed in the library? Please indicate.
 ☐ Full time ☐ Part-time

15. How many volunteer workers do you have? _____

16. Approximately how many hours per week do volunteers work? _____

17. What are the duties of volunteer workers? Please check below.

| | |
|--------------------------|-----------------------------------|
| <input type="checkbox"/> | Distribute books |
| <input type="checkbox"/> | Do clerical work |
| <input type="checkbox"/> | Solicit financial aid for library |
| <input type="checkbox"/> | Solicit books for library |
| <input type="checkbox"/> | Conduct discussions |
| <input type="checkbox"/> | Assist with book selection |
| <input type="checkbox"/> | Other _____ |

18. If books are not supplied by the public library, how are they secured?
 Please check below.

| | |
|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Purchase | <input type="checkbox"/> Bequest |
| <input type="checkbox"/> Donation | <input type="checkbox"/> Other _____ |

19. Please give the titles of three or four major lists from which you select books for the hospital library.

20. Approximately how many volumes of the following types of books do you have in your collection?

| | |
|--|--|
| <input type="checkbox"/> General Reference | <input type="checkbox"/> Applied Arts |
| <input type="checkbox"/> Psychology | <input type="checkbox"/> Fine Arts |
| <input type="checkbox"/> Religion | <input type="checkbox"/> Travel |
| <input type="checkbox"/> Social Sciences | <input type="checkbox"/> Biography |
| <input type="checkbox"/> Science | <input type="checkbox"/> History |
| <input type="checkbox"/> Professional books | <input type="checkbox"/> Fiction |
| <input type="checkbox"/> for doctors, nurses, and technicians | <input type="checkbox"/> Children's books |
| <input type="checkbox"/> Other _____ | |

21. Please list the five most popular types of books read by patients (such as fiction, psychology, religion, etc.).

1. _____
 2. _____
 3. _____
 4. _____
 5. _____

22. How many periodicals do you receive regularly? _____

23. Please list the five most popular magazines read by patients.

1. _____
2. _____
3. _____
4. _____
5. _____

24. How are the patients first introduced to the library? Please check.

- ☐ Book cart going through wards and rooms
☐ Personal visit by librarian
☐ Recommendation of doctor
☐ Recommendation of nurse
☐ Publicity of library -- posters, pamphlets, etc.
☐ Other _____

25. How many times per week do you give service to the wards and rooms by means of the book cart? _____

26. What special services do you provide for patients? Please check below.

- ☐ Book Clubs ☐ Book Reviews
☐ Hobby Clubs ☐ Other _____

27. If you provide special services for the following types of patients please indicate briefly the nature of these services. Please write on back of this sheet if there is not enough space below.

- | | |
|-------|-----------------------|
| _____ | Surgical |
| _____ | Cancer |
| _____ | Convalescent and rest |
| _____ | Drug and alcoholic |
| _____ | Epileptic |
| _____ | Tubercular |
| _____ | Mental |
| _____ | Orthopedic |
| _____ | Venereal |
| _____ | Blind |
| _____ | Other |

28. What audio-visual materials do you use in the library? Please check below.

_____ Talking books
_____ Projected books
_____ Braille books for the blind
_____ Other _____

29. Do you provide any type of service for patients after they leave the hospital? Please check _____ Yes _____ No

30. If so, what type? _____

31. Please describe any special services given to doctors, nurses, and technicians. _____

32. The space below is reserved for any remarks or comments which you feel might help in completing this study.

Please send samples of any printed or mimeographed material pertaining to your hospital library facilities and services. We would be most grateful if you would also attach a list of the periodicals received regularly in your library. I shall be pleased to pay the postage on such materials.

Signature _____
Official Title _____

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